

POSITION DESCRIPTION (Please Read Instructions on the Back)

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| 2. Reason for Submission <input type="checkbox"/> Redescription <input checked="" type="checkbox"/> New <input type="checkbox"/> Hdqtrs <input checked="" type="checkbox"/> Field <input type="checkbox"/> Reestablishment <input type="checkbox"/> Other Explanation (Show any positions replaced) Standard MWR NAF PD | | | | | | | | | | 3. Service | | | | | | | | | | 4. Employing Office Location | | | | | | | | | | 5. Duty Station | | | | | | | | | | 1. Agency Position No. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7. Fair Labor Standards Act <input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Nonexempt | | | | | | | | | | 8. Financial Statements Required <input type="checkbox"/> Executive Personnel Financial Disclosure <input type="checkbox"/> Employment and Financial Interest | | | | | | | | | | 9. Subject to IA Action <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | | | | 6. OPM Certification No. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 10. Position Status <input type="checkbox"/> Competitive <input type="checkbox"/> Excepted (Specify in Remarks) <input type="checkbox"/> SES (Gen.) <input type="checkbox"/> SES (CR) | | | | | | | | | | 11. Position Is <input type="checkbox"/> Supervisory <input checked="" type="checkbox"/> Managerial <input checked="" type="checkbox"/> Neither | | | | | | | | | | 12. Sensitivity <input checked="" type="checkbox"/> 1--Non-Sensitive <input type="checkbox"/> 3--Critical <input type="checkbox"/> 2--Noncritical Sensitive <input type="checkbox"/> 4--Special Sensitive | | | | | | | | | | 13. Competitive Level Code | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 15. Classified/Graded by | | | | | | | | | | Official Title of Position | | | | | | | | | | Pay Plan | | | | | | | | | | Occupational Code | | | | | | | | | | Grade | | | | | | | | | | 14. Agency Use NAF | | | | | | | | | | | | | | | | | | | |
| a. Office of Personnel Management | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Initials | | | | | | | | | | Date | | | | | | | | | |
| b. Department, Agency or Establishment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| c. Second Level Review | | | | | | | | | | Payroll Clerk | | | | | | | | | | NF | | | | | | | | | | 0544 | | | | | | | | | | 01 | | | | | | | | | | SN | | | | | | | | | | 12-31-01 | | | | | | | | | |
| d. First Level Review | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| e. Recommended by Supervisor or Initiating Office | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 16. Organizational Title of Position (if different from official title) | | | | | | | | | | | | | | | | | | | | 17. Name of Employee (if vacant, specify) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 18. Department, Agency, or Establishment | | | | | | | | | | | | | | | | | | | | c. Third Subdivision | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| a. First Subdivision | | | | | | | | | | | | | | | | | | | | d. Fourth Subdivision | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| b. Second Subdivision | | | | | | | | | | | | | | | | | | | | e. Fifth Subdivision | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 19. Employee Review-This is an accurate description of the major duties and responsibilities of my position. | | | | | | | | | | | | | | | | | | | | Signature of Employee (optional) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 20. Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the knowledge that | | | | | | | | | | | | | | | | | | | | this information is to be used for statutory purposes relating to appointment and payment of public funds, and that false or misleading statements may constitute violations of such statutes or their implementing regulations. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| a. Typed Name and Title of Immediate Supervisor | | | | | | | | | | | | | | | | | | | | b. Typed Name and Title of Higher-Level Supervisor or Manager (optional) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature | | | | | | | | | | Date | | | | | | | | | | Signature | | | | | | | | | | Date | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 21. Classification/Job Grading Certification. I certify that this position has been classified/graded as required by Title 5, U.S. Code, in conformance with standards published by the U.S. Office of Personnel Management or, if no published standards apply directly, consistently with the most applicable published standards. | | | | | | | | | | | | | | | | | | | | 22. Position Classification Standards Used in Classifying/Grading Position OPM Job Family Std Clerical Tech Acct Budget Work GS-0500C HRCD-4 Dec 97 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Typed Name and Title of Official Taking Action S. J. NEW Principal Classifier | | | | | | | | | | | | | | | | | | | | Information for Employees. The standards, and information on their application, are available in the personnel office. The classification of the position may be reviewed and corrected by the agency or the U.S. Office of Personnel Management. Information on classification/job grading appeals, and complaints on exemption from FLSA, is available from the personnel office or the U.S. Office of Personnel Management. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature | | | | | | | | | | Date | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 23. Position Review | | | | | | | | | | Initials | | | | | | | | | | Date | | | | | | | | | | Initials | | | | | | | | | | Date | | | | | | | | | | Initials | | | | | | | | | | Date | | | | | | | | | |
| a. Employee (optional) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| b. Supervisor | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| c. Classifier | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 24. Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

25. Description of Major Duties and Responsibilities (See Attached)

NONAPPROPRIATED FUND POSITION DESCRIPTION**JOB TITLE:** Payroll Clerk **POSITION NUMBER** 01-0112**JOB SERIES:** 0544 **PAY LEVEL:** NF-1**Summary of Duties:**

Assists in the basic payroll process by performing such tasks as:

Sets up and changes employees accounts to reflect pay changes resulting from personnel actions, deductions or temporary changes affecting one or a few pay periods. Audits authorization documents for completeness, accuracy and propriety prior to changing rates of pay. Reviews and verifies allotment requests for accuracy, corrects computer printouts of rejected material, balances, controls and prepares replies to correspondence concerning allotments. Audits yearly time and attendance cards, traces and corrects common errors. Balances blocks of accounts.

Verifies the accuracy of time, leave, and pay codings and computations made, and for the adequacy and appropriateness of documentation furnished by various submitting sources to substantiate payroll, time and leave or deduction actions being taken.

Assists in maintaining payroll record files. Balances and reconciles payroll and pay records.

Performs other related duties as assigned.

Minimum Qualifications:

Must have knowledge of payroll rules, regulations, procedures, programs and systems requirements. Must be skilled in the use of various office machines, such as adding machine, calculator, typewriter, computer, etc. Six months of experience is preferred.